	PATENT	APPLICATIO Effect	100 4600									
CLAIMS AS FILED - PART I (Cotumn 1) (Cotumn 2)								MALL E	YIIIY	OR	OTHER	
TOTAL CLAIMS			58					RATE	FEE]	RATE	FEE
R	R		NUMBER	FELED	NUMBER EXTRA			ASIC FEE	370.00	OR	BASIC FEE	740.00
π	TAL CHARGE	VBLE CLAIMS	Sg mi	กบร 20=	• 38			X\$ 9=		OR	X\$18=	684
IN	DEPENDENT C	LAIMS	6 m	inus 3 e	• 3		r	X42-		OR	X84=	252
M	ILTIPLE DEPEN	IDENT CLAIM P	RESENT				r	+140=		1	+280=	<i>y</i>
* if the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	1176
CLAIMS AS AMENDED - PART II						OTHER THAN						
(Column 1)			(Column 2)			(Column 3)	otumn 3) SMALL			OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 98	Minus	· S		- 40	Γ	X\$ 9=		OR	X\$18=	720
	independent	• 4	Minus		B		Γ	X42=		OR	X84=	
	FIRST PRESE	RIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+140=.		OR	+280 =		
		Pail				/	40	YOTAL OIT, FEE		OR	YOYAL ADDIT, FEE	720
		(Column 1) (Column 2) (Column 3)								• •		
AMENDMENT B		CLAIMS REMAINING AFTER AMENOMENT		HIGH NUM PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 5 x	May C			•	;	X\$ 9=		OR	X\$18=	
	Independent	Independent + / Mainus C		ENDENT CLAIM				X42=		OA	X84=	
_	FINSI PRESENTATION OF MODIFIE PEPERDENT COMM							140=		OR	+280=	
n	1250	<u>-</u>					ADI	TOTAL DIT FEE		OR,	YOYAL DOIT, FEE	
\mathcal{U}	130			(Colum		(Column 3)						
ENTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	SER SUSLY	PRESENT EXTRA	[f	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDME	Total	.102	Minus	-99	3_	• —	[C\$ 9=		OR	X\$18=	ſ
ME	independent	• 4	Minus	es /	2	• -	7	X42=		OR	X84=	
L		NTATION OF M					1	140=		OR	+280=	_
-	If the entry in colu If the "Highest Mu	ADE	TOTAL DIT. FEE		OR ,	TOTAL DOIT, FEE						

FORM PTO-679 (Rest &(01)

Patient and Trademati Office, U.S. DEPARTMENT OF COMME

Application or Docket Number